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PTO/SB/17 (12-04v2) Approved for use through 07/31/2006. OMB 0651-0032

Under the Penerwork Reduction	Act of 1995	no nersons are requir	ed to res	spond to a collection	of informatio	n unless it displays	a valid OMB control number		
Effective on 12/08/2004.				Complete if Known					
A DES PARAGRANTO LAS CONTROLLES AND PROPRIES				Application Numb	per 10/	10/709,661			
FEE TRANSMITTAL			<u>L</u> [	Filing Date	05/:	05/20/2004			
For FY 2005			l	First Named Inve	ntor JOI	JONSSON			
Applicant claims small antity status. See 27 CER 1 27				Examiner Name	RO	RODRIGUEZ			
Applicant claims small entity status. See 37 CFR 1.27				Art Unit	374	3746			
TOTAL AMOUNT OF PAYN	ENT (\$)	1720		Attorney Docket	No. 075	89.0175.PCU	S00		
METHOD OF PAYMENT (check all that apply)									
Check ✓ Credit Card  Money Order  Other (please identify):									
Deposit Account Deposit Account Number: 141437 Deposit Account Name: Novak Druce & Quigg, LLP									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee									
Charge any additional fee(s) or underpayments of fee(s)  Credit any overpayments									
under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card									
information and authorization on PTO-2038.									
FEE CALCULATION		EVALUATION 5							
1. BASIC FILING, SEAR	FILING			CH FEES	FXAMIN	ATION FEES			
Application Type	5	mall Entity		<b>Small Entity</b>		Small Entity	Food Bold (ft)		
Utility	Fee (\$) 300	<u>Fee (\$)</u> 150	Fee (\$)	1 <u>Fee (\$)</u> 250	Fee (\$) 200	<u>Fee (\$)</u> 100	Fees Paid (\$)		
Design	200	100	100	50	130	65			
Plant	200	100	300	150	160	80			
Reissue	300	150	500	250	600	300			
Provisional	200	100	0	0	000	0			
2. EXCESS CLAIM FEE		100	U	U	U		Small Entity		
Fee Description	_					Fee (\$)	Fee (\$)		
Each claim over 20 (including Reissues)						50	25		
Each independent claim over 3 (including Reissues)  Multiple dependent claims						200 360	100 180		
• •				Paid (\$)			ependent Claims		
<u>26</u> - 20 or HP = <u>6</u> x <u>50</u> = <u>300</u> <u>Fee (\$)</u> <u>Fee Paid (\$)</u>									
HP = highest number of total claims paid for, if greater than 20.									
Indep. Claims									
HP = highest number of independent daims paid for, if greater than 3.									
3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer									
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50									
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)									
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)									
4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)  Fees Paid (\$)									
	Other (e.g., late filing surcharge): Extension Fee (\$1020)								

SUBMITTED BY Registration No. 35,493 Telephone 202.659.0100 Signature (Attorney/Agent) Date 12/17/2005 Name (Print/Type) Tracy W. Druge

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. JAN 2. 0 2006 S

PTO/SB/22 (10-00) Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless if displays a valid OMB control number.

PETITION FOR EXTENSION OF 1		Docket Number (Optional) 07589.0175.PCUS00						
In re Application of JONSSON								
	Application Number 10/709,661		Filed 05/20/2004					
	For Device For A Combustion Chamber Of A Gas Turbine							
	Group Art Unit 3746	Examiner	RODRIGUEZ					
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.								
The requested extension and appropriate non-small-entity fee are as follows (check time period desired):								
One month (37 CFR 1.17(a)		\$						
Two months (37 CFR 1.17(a	u)(2))		\$					
√ Three months (37 CFR 1.17)		\$ <u>1020</u>						
Four months (37 CFR 1.17(a		\$						
Five months (37 CFR 1.17(a			\$					
Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$  A check in the amount of the fee is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Commissioner has already been authorized to charge fees in this application to a Deposit Account.  The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number141437  I have enclosed a duplicate copy of this sheet.  I am the applicant/inventor  assignee of record of the entire interest. See 37 CFR 3.71.								
attorney or agent under 37 CFR 1.34(a).  Registration number if acting under 37 CFR 1.34(a).								
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.								
12/17/2005	- Juan	Ruc	e					
Date Signature								
Tracy W. Druce								
Typed or printed name								
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.								
Total of 1 forms are submitted	1.							

Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.